



2143

CISCO-3666

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Niraj Gopal
SERIAL NO.: 09/884,801
FILING DATE: June 18, 2001
TITLE: MIB DETECTING DATA MODIFICATION IN MIB TABLES
IN AN SNMP COMMAND RESPONDER
EXAMINER: Dennison, Jerry B.
ART UNIT: 2143

RESPONSE TO OFFICE ACTION

MS NON-FEE AMENDMENT
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Dear Sir:

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 09/884,801

Filing Date June 18, 2001

First Named Inventor Niraj Gopal

Art Unit 2143

Examiner Name Dennison, Jerry B.

Attorney Docket Number CISCO-3666

ENCLOSURES (check all that apply)

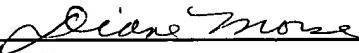
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Thelen Reid & Priest LLP		
Signature			
Printed Name	David B. Ritchie		
Date	2-18-05	Reg. No.	31,562

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Diane Morse	Date	2-18-05

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